10/7/2/31

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

104035.271436

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			//		100.			RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED .		NUME	BER EXTRA		BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			// minus 20= '		• &			X\$ 9=		OR	X\$18=	
IN	DEPENDENT C	LAIMS	2_minus 3 =		0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	220	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENTA	9/8/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	- 2	Ō	<u>- 0</u>		X6-3=		OR	-X848-	0
	Ind pendent	NTATION OF MU	Minus	*** /	F CI AINA	- 0	l F	- >43=		OR	- X00-	0
_	FIRST PRESE	NIATION OF MI	JETIPLE DEF	PENDENI	CLAIM		' .[-#145=		OR	+250=	0
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
•		(Column 1)	• 	(Colum	nn 2)	(Column 3)						
AMENDMENT'B.		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ,		X\$ 9=	•	OR	X\$18=	
	Independent	*	Minus	***		-		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		۱ <u>۱</u>	+145=	,	OR	+290=	
							Ļ Ar	TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	•	(Colum	n 2)	(Column 3)	_					
Z		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≒	
	Independent	L	Minus	***		=		X43=		ام	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 			OR		
							- I .	+145=		OR	+290=	THE STATE OF THE S
• н	the entry in colum	nn 1 is less than the	e entry in co±o	nn 2. write '	n an	ımn 3	L			^{∨~} [
t	the "Highest Nur	nn 1 is less than the mber Previously Pai mber Previously Pa	id For IN THIS	SPACE is	less than	20. enter "20."	. L	TOTAL DOIT. FEE			TOTAL DOIT. FEE	